Company Tracking Number: 2008-006

TOI: 16.0 Workers Compensation Sub-TOI: 16.0004 Standard WC

Product Name: Workers Compensation

Project Name/Number: NCCI Rules Adoption/2008-006

#### Filing at a Glance

Company: Penn Millers Insurance Company

Product Name: Workers Compensation SERFF Tr Num: PENM-125422035 State: Arkansas

TOI: 16.0 Workers Compensation SERFF Status: Closed State Tr Num: EFT \$25

Sub-TOI: 16.0004 Standard WC Co Tr Num: 2008-006 State Status: Fees verified and

received

Filing Type: Rule Co Status: Reviewer(s): Betty Montesi, Carol

Stiffler, Brittany Yielding

Author: Stanley Balut Disposition Date: 01/09/2008

Date Submitted: 01/09/2008 Disposition Status: Approved

State Filing Description:

#### **General Information**

Project Name: NCCI Rules Adoption

Status of Filing in Domicile: Not Filed

Project Number: 2008-006

Domicile Status Comments: None

Reference Organization: NCCI Reference Number: 01-AR-2007, 02-AR-2007,

B-1387-A, B-1397, B-1397-A, B-1404, B-1405,

P-1405, E-1400 & R-1396

Reference Title: Varies Advisory Org. Circular: AR-2007-05, AR-2007-

09, CIF-2007-07, CIF-2006-08, AR-2007-12, CIF-2007-06, CIF-2007-09, CIF-2007-10, CIF-

2006-09 & CIF-2007-05

Filing Status Changed: 01/09/2008

State Status Changed: 01/09/2008 Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

Penn Millers will adopt without change filed NCCI rules approved in 2007 for the Workers Compensation line of

business in Arkansas.

Company Tracking Number: 2008-006

TOI: 16.0 Workers Compensation Sub-TOI: 16.0004 Standard WC

Product Name: Workers Compensation

Project Name/Number: NCCI Rules Adoption/2008-006

#### **Company and Contact**

#### **Filing Contact Information**

Stanley Balut, Senior Analyst sbalut@pennmillers.com
PO Box P (800) 233-8347 [Phone]
Wilkes-Barre, PA 18773-0016 (570) 829-2060[FAX]

**Filing Company Information** 

Penn Millers Insurance Company CoCode: 14982 State of Domicile: Pennsylvania

PO Box P Group Code: -99 Company Type:

72 North Franklin Street

Wilkes-Barre, UNK 18773-0016 Group Name: State ID Number:

(800) 233-8347 ext. [Phone] FEIN Number: 24-0686200

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#### **Filing Fees**

Fee Required? Yes
Fee Amount: \$25.00
Retaliatory? No

Fee Explanation: Per general instructions \$25 fee to adopt advisory organization rules without chnage

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

Penn Millers Insurance Company \$25.00 01/09/2008 17407494

SERFF Tracking Number: PENM-125422035 State: Arkansas

Filing Company: Penn Millers Insurance Company State Tracking Number: EFT \$25

Company Tracking Number: 2008-006

TOI: 16.0 Workers Compensation Sub-TOI: 16.0004 Standard WC

Product Name: Workers Compensation

Project Name/Number: NCCI Rules Adoption/2008-006

## **Correspondence Summary**

#### **Dispositions**

Status	Created By	Created On	Date Submitted
Approved	Carol Stiffler	01/09/2008	01/09/2008

Company Tracking Number: 2008-006

TOI: 16.0 Workers Compensation Sub-TOI: 16.0004 Standard WC

Product Name: Workers Compensation

Project Name/Number: NCCI Rules Adoption/2008-006

#### **Disposition**

Disposition Date: 01/09/2008

Effective Date (New): 01/01/2008

Effective Date (Renewal):

Status: Approved

Comment: All workers' compensation filings are prior approval in Arkansas. They cannot be approved retroactively.

However, the Commissioner has agreed that Items B-1405 and P-1405 which refer to terrorism will be approved

retroactively to 1/1/08.

The other filings listed can not be approved 1/1/08 but can be approved 1/09/08.

Rate data does NOT apply to filing.

 SERFF Tracking Number:
 PENM-125422035
 State:
 Arkansas

 Filing Company:
 Penn Millers Insurance Company
 State Tracking Number:
 EFT \$25

Company Tracking Number: 2008-006

TOI: 16.0 Workers Compensation Sub-TOI: 16.0004 Standard WC

Product Name: Workers Compensation

Project Name/Number: NCCI Rules Adoption/2008-006

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Propert	y &Approved	Yes
•	Casualty		
Supporting Document	NAIC Loss Cost Filing Document for	Approved	Yes
0	Workers' Compensation		
Supporting Document	NAIC loss cost data entry document	Approved	Yes
Supporting Document	NCCI Circular	Approved	Yes

SERFF Tracking Number: PENM-125422035 State: Arkansas State Tracking Number: EFT \$25

Filing Company: Penn Millers Insurance Company

Company Tracking Number: 2008-006

TOI: 16.0 Workers Compensation Sub-TOI: 16.0004 Standard WC

Product Name: Workers Compensation

Project Name/Number: NCCI Rules Adoption/2008-006

### **Rate Information**

Rate data does NOT apply to filing.

Company Tracking Number: 2008-006

TOI: 16.0 Workers Compensation Sub-TOI: 16.0004 Standard WC

Product Name: Workers Compensation

Project Name/Number: NCCI Rules Adoption/2008-006

## **Supporting Document Schedules**

**Review Status:** 

Satisfied -Name: Uniform Transmittal Document- Approved 01/09/2008

**Property & Casualty** 

Comments:

Attachment:

NAIC P&C Transmittal Document.pdf

**Review Status:** 

Bypassed -Name: NAIC Loss Cost Filing Document Approved 01/09/2008

for Workers' Compensation

Bypass Reason: Not a loss cost filing

Comments:

**Review Status:** 

Bypassed -Name: NAIC loss cost data entry document Approved 01/09/2008

Bypass Reason: Not a loss cost filing

**Comments:** 

**Review Status:** 

Satisfied -Name: NCCI Circular Approved 01/09/2008

Comments:

Attched circular received from NCCI and summarizes their filing action from 1-1-2007 to 1-1-2008.

Attachment:

FYI-AR-2008-01.pdf

# **Property & Casualty Transmittal Document**

1.	Reserved for Insurance	2. In	nsur	rance Department	Use only		
	Dept. Use Only	a. D	ate	the filing is received	d:		
			nalv				
		c. D	oispo	osition:			
				of disposition of the	filing:		
				tive date of filing:	<u> </u>		
			New Business				
			Renewal Business				
		f. S	tate	Filing #:			
				FF Filing #:			
				ect Codes			
3.	Group Name					Group NAIC #	
	Penn Millers					125	
4.	Company Name(s)			Domicile	NAIC#	FEIN#	
	Penn Millers Insurance Compar	าง		Pennsylvania	14982	24-0686200	
		- 7			1100		
5.	<b>Company Tracking Number</b>		200	08-006			
	Company Tracking Number	Officer		08-006 [include toll-free num	nber]	,	
		Officer Tit	(s)		iber]	e-mail	
Cor	ntact Info of Filer(s) or Corporate  Name and address  Stanley R Balut	Titl Sen	(s) le	[include toll-free num	-	e-mail sbalut@pennmillers.com	m
Cor	Name and address Stanley R Balut 72 N. Franklin St., PO Box P,	Titl	(s) le	[include toll-free num	FAX#		m
Cor	ntact Info of Filer(s) or Corporate  Name and address  Stanley R Balut	Titl Sen	(s) le	[include toll-free num	FAX#		m
Cor	Name and address Stanley R Balut 72 N. Franklin St., PO Box P,	Titl Sen	(s) le	[include toll-free num	FAX#		m
Cor	Name and address Stanley R Balut 72 N. Franklin St., PO Box P,	Titl Sen	(s) le	[include toll-free num	FAX#		m
Cor	Name and address Stanley R Balut 72 N. Franklin St., PO Box P,	Titl Sen	(s) le	[include toll-free num	FAX # 570-826-2060		m
6.	Name and address Stanley R Balut 72 N. Franklin St., PO Box P, Wilkes-Barre, PA 18773-0016	Titl Sen Anal	(s) le	Telephone #s 800-233-8347	FAX # 570-826-2060		m
7.	Name and address Stanley R Balut 72 N. Franklin St., PO Box P, Wilkes-Barre, PA 18773-0016  Signature of authorized filer Please print name of authorized	Titl Sen Anal	(s) le ior yst	[include toll-free num Telephone #s 800-233-8347 Isi Stanley R Stanley R Balut	FAX # 570-826-2060		m
7. 8.	Name and address Stanley R Balut 72 N. Franklin St., PO Box P, Wilkes-Barre, PA 18773-0016  Signature of authorized filer	Titl Sen Anal	(s) le ior yst	[include toll-free num Telephone #s 800-233-8347  Isl Stanley R Stanley R Balut or descriptions of the	FAX # 570-826-2060  Palut  ese fields)		m
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7. 8. Fili	Name and address Stanley R Balut 72 N. Franklin St., PO Box P, Wilkes-Barre, PA 18773-0016  Signature of authorized filer Please print name of authorized ng information (see General Ins Type of Insurance (TOI) Sub-Type of Insurance (Sub-TO State Specific Product code(s)(if	Sen Anal	(s) le ior yst	[include toll-free num Telephone #s 800-233-8347  Isl Stanley R Stanley R Balut or descriptions of the	FAX # 570-826-2060  Palut  ese fields)		m
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7. 8. Fili 9. 10. 11.	Name and address Stanley R Balut 72 N. Franklin St., PO Box P, Wilkes-Barre, PA 18773-0016  Signature of authorized filer Please print name of authorized ng information (see General Ins Type of Insurance (TOI) Sub-Type of Insurance (Sub-TO State Specific Product code(s)(if applicable)[See State Specific Requirem Company Program Title (Marketin	Titl Sen Anal  d filer truction I)	le ior yst wo	Include toll-free num Telephone #s 800-233-8347  Isl Stanley R Stanley R Balut or descriptions of the orkers Compensation orkers Compensation	FAX # 570-826-2060  Palut  ese fields)	sbalut@pennmillers.com	m
7. 8. Fili 9. 10.	Name and address Stanley R Balut 72 N. Franklin St., PO Box P, Wilkes-Barre, PA 18773-0016  Signature of authorized filer Please print name of authorized ng information (see General Ins Type of Insurance (TOI) Sub-Type of Insurance (Sub-TO State Specific Product code(s)(if applicable)[See State Specific Requirem	Titl Sen Anal  d filer truction I)	(s)  le ior yst  wo	Include toll-free num  Telephone #s  800-233-8347  Isl Stanley R  Stanley R Balut  or descriptions of the orkers Compensation  orkers Compensation  Rate/Loss Cost	FAX # 570-826-2060  Palut  ese fields)  n  Rules Rates/I	sbalut@pennmillers.com	m
7. 8. Fili 9. 10. 11.	Name and address Stanley R Balut 72 N. Franklin St., PO Box P, Wilkes-Barre, PA 18773-0016  Signature of authorized filer Please print name of authorized ng information (see General Ins Type of Insurance (TOI) Sub-Type of Insurance (Sub-TO State Specific Product code(s)(if applicable)[See State Specific Requirem Company Program Title (Marketin	Titl Sen Anal  d filer truction I)	(s) le ior yst  wo Wo	Include toll-free num  Telephone #s  800-233-8347  Isl Stanley R  Stanley R Balut  or descriptions of the orkers Compensation  Rate/Loss Cost  Forms  Combina	FAX # 570-826-2060  Palut  ese fields)  n  Rules  Rates/I	sbalut@pennmillers.com	m
7. 8. Fili 9. 10. 11.	Name and address Stanley R Balut 72 N. Franklin St., PO Box P, Wilkes-Barre, PA 18773-0016  Signature of authorized filer Please print name of authorized ng information (see General Ins Type of Insurance (TOI) Sub-Type of Insurance (Sub-TO State Specific Product code(s)(if applicable)[See State Specific Requirem Company Program Title (Marketin	Titl Sen Anal  d filer truction I)	(s) le ior yst  wo Wo	Include toll-free num  Telephone #s  800-233-8347   Isl Stanley R  Stanley R Balut  or descriptions of the orkers Compensation  orkers Compensation  Rate/Loss Cost  Forms  Combina  Withdrawal  Other	FAX # 570-826-2060  Palut  See fields)  Rules Rates/Intion Rates/Rules/Intion Rates/Rules/Ru	sbalut@pennmillers.com	m

PC TD-1 pg 1 of 2

## **Property & Casualty Transmittal Document---**

17. R	Reference Organization (if applicable)	NCCI		
	Reference Organization # & Title	G A T 1 1NGGLG! 1 FYH AB 2000 01		
4.0	Reference Organization # & Title See Attached NCCI Circular FYI-AR-2008-01			
18. C	Company's Date of Filing January 9, 2008			
19. S	Status of filing in domicile	Not Filed Pending Authorized Disapproved		
20. This filing transmittal is part of Company Tracking # 2008-006				
21. Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]				

22.		Fees (Filer must provide check # and fee amount if applicable) ate requires you to show how you calculated your filing fees, place that calculation below]
	heck #: mount:	
Ref	er to ea	ch state's checklist for additional state specific requirements or instructions on calculating

\*\*\*Refer to each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)

fees.





**January 3, 2008** 

#### State Information

FYI-AR-2008-01

#### Arkansas-List of Item Filings and Circulars Approved in 2007

Arkansas law does not permit NCCI to file rules on its members' behalf. Therefore, insurance carriers must make an independent filing with the Arkansas Insurance Department electing to adopt, or not adopt, an item filing filed by NCCI and subsequently approved by the Department. When such a filing is made with the Department, make sure that the NCCI item filing number (not the NCCI circular number) is referenced. Listed below are all filings approved in Arkansas for the period from January 1, 2007 to January 1, 2008, as well as the circulars that were issued. If you need more information, please contact NCCI's Customer Service Center at 800-NCCI-123 (800-622-4123). Please note that the results of these filings are currently reflected in NCCI's Basic Manual for Workers Compensation and Employers Liability Insurance, Experience Rating Plan Manual, Forms Manual, and Retrospective Rating Plan Manual.

Filing Number	Circular Number	Effective Date	Description of Item
01-AR-2007	AR-2007-05	7/1/08	Elimination of the Manual of Underground Coal Mine Rules
02-AR-2007	AR-2007-09	7/1/07	Revision to the Basic Manual Classification Code 2719—Logging or Tree Removal—Certified Mechanized Harvesting Exclusively
B-1387-A	CIF-2007-07	10/1/07	Charitable Welfare Organizations & Group Homes
B-1397	CIF-2006-08	7/1/07	Revisions to Basic Manual Classifications and Rules
B-1397-A	AR-2007-12	7/1/07	Revisions to Basic Manual Classifications and Rules—Amendments
B-1404	CIF-2007-06	1/1/08	Basic Manual Revision to Appendix E—Table of Classifications by Hazard Group
B-1405	CIF-2007-09	1/1/08	Revision of Rule 3-A-24-a as a result of the Terrorism Risk Insurance Program Reauthorization Act of 2007
P-1405	CIF-2007-10	1/1/08	Revision of WC 00 01 13 and WC 00 04 21 A as a result of the Terrorism Risk Insurance Program Reauthorization Act of 2007
E-1400	CIF-2006-09	For experience rating modifications with rating effective dates of May 27, 2002 through June 12, 2007	Exclusion of Catastrophe Losses from Experience Rating
R-1396	CIF-2007-05	1/1/08; 4/1/08	2007 Update to Retrospective Rating Plan Parameters

If you have any questions, please contact:

Terri Robinson

State Relations Executive

NCCI, Inc.

2400 Crestwood, Suite 207

North Little Rock, AR 72116

501-753-5180

**Technical Contact:** 

Shani Oulton

Regulatory Services Manager

NCCI, Inc.

901 Peninsula Corporate Circle

Boca Raton, FL 33487

561-893-3168